

PART B - FEE(S) TRANSMITTAL

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02/08/04 7590 07/12/2004

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01 FC:1504 1330.00 DA

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Saundra M. Lewis (Depositor's name)
Saundra M. Lewis (Signature)
9/2/04 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
0063,757	05/10/2002	Peter A. Friedman	202-0173 RLC	1572

TITLE OF INVENTION: COMPRESSED-RADIUS HEM-FORMING PROCESS AND TOOL

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
non-provisional	NO	\$1330	\$300	\$1630	10/12/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
LARSON, LOWELL A	3725	072-220000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

XX Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Raymond L. Coppiellie

2 Brooks & Kushman, PC

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Ford Motor Company

Unova Industrial Automation Systems, Inc.

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

One American Road, Dearborn, MI 48126

5663 E. Nine Mile Road, Warren, MI 48091

Please check the appropriate assignee category or categories (will not be printed on the patent):

□ individual ☒ corporation or other private group entity □ government

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□ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

□ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

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(Authorized Signature)

(Date)

9/2/04

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